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FEC FORM 2

STATEMENT OF CANDIDACY

						=
1. (a) Name of Candidate (in full)						
Porter, Katherine, , ,						
(b) Address (number and street) P.O. Box 5176	□ Chec	k if address (changed		Candidate's FEC Identification Number H8CA45130	
(c) City, State, and ZIP Code					3. Is This New Amende	;d
Irvine		CA	9261	7	Statement (N) OR (A)	
4. Party Affiliation	5. Office Sought			6. State & Dist	trict of Candidate	
DEMOCRATIC PARTY	House			CA	45	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s). (year of election)						
NOTE: This designation should be	filed with the approp	oriate office I	isted in th	ne instructions.		
(a) Name of Committee (in full)						
Katie Porter for Co	ngress					
(h) Address (number and street)						
(b) Address (number and street) PO Box 5176						
(c) City, State, and ZIP Code						
Irvine				CA	92617	
D			_	_	COMMITTEES	
	(Inclu	uding Joint F	undraisin	g Representativ	res)	
8. I hereby authorize the following na	med committee, whi	ch is NOT m	y principa	al campaign cor	nmittee, to receive and expend funds on behalf of my	,
candidacy.						
NOTE: This designation should be	filed with the princin	al campaign	committe	20		
MOTE. This designation should be	illed with the princip	ai campaign	COMMIN	ee.		
(a) Name of Committee (in full)						
California Candida	tes Victory Fu	und				
(b) Address (number and street)						
777 S. Figueroa St.						
Ste. 4050						
(c) City, State, and ZIP Code						
Los Angeles				CA	90017	
				<i>O</i> /1	30017	
L certify that I have e	ramined this Stateme	ent and to the	e hest of	mv knowledae a	and helief it is true, correct and complete	_
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.						
Signature of Candidate					Date	•
Porter, Katherine, , ,			[Elect	ronically Filed]	11/15/2020	
			_			
<u> </u>						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						
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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on b candidacy. NOTE : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)				
	Red To Blue Victory Fund				
	(b) Address (number and street) 430 South Capitol Street SE 2nd Floor				
	(c) City, State, and ZIP Code				
	Washington	DC	20002		
8.	I hereby authorize the following named committee, which is NOT my princ candidacy. NOTE : This designation should be filed with the principal cam				
	(a) Name of Committee (in full)		_		
	Lofgren Victory Fund				
	(b) Address (number and street) c/o Contribution Solutions LLC				
	1346 The Alameda #7-380				
	(c) City, State, and ZIP Code				
	San Jose	CA	95126		
Ο.	I hereby authorize the following named committee, which is NOT my princ candidacy. NOTE: This designation should be filed with the principal cam (a) Name of Committee (in full) Takano California Wave				
	(b) Address (number and street) PO Box 15320				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		
8.	3. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	Katie Porter Victory Fund				
	(b) Address (number and street) 611 Pennsylvania Ave SE				
	Ste 143				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf candidacy. NOTE : This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)			
	Porter Rose Victory Fund			
	(b) Address (number and street) 910 17th St NW Ste 925			
	(c) City, State, and ZIP Code			
	Washington	DC	20006	
8.	3. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf o candidacy. NOTE: This designation should be filed with the principal campaign committee.			
	(a) Name of Committee (in full)			
	Nadler Victory Fund			
	(b) Address (number and street) 200 W 79th St #8N			
	(c) City, State, and ZIP Code		_	
	New York	NY	10024	
8.	8. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campai (a) Name of Committee (in full) Hold The House Frontline Fund		mmittee, to receive and expend funds on behalf of my	
	(b) Address (number and street) 401 2nd Ave S			
	Ste 303 (c) City, State, and ZIP Code			
		WA	09404	
	Seattle	VVA	98104	
8.	B. I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campai (a) Name of Committee (in full)		mmittee, to receive and expend funds on behalf of my	
	(b) Address (number and street)			
	(c) City, State, and ZIP Code			